Application No. Filing Date	AMENDMENT TRANSMITTAL LETTER						Docket No. UAB-15102/22	
Method of treating traumatic brain and spinal cord injuries and other neurogenic conditions using non-steroidal anti-inflammatory drugs and naturally occurring conotoxins  TO THE COMMISSIONER FOR PATENTS  Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.  CLAIMS AS AMENDED    CLAIMS AS AMENDED								
wention: Method of freating traumatic brain and spinal cord injuries and other neurogenic conditions using non-steroidal anti-inflammatory drugs and naturally occurring conotoxins  TO THE COMMISSIONER FOR PATENTS  Transmitted herewith is an amendment in the above-identified application. he fee has been calculated and is transmitted as shown below.    Claims	10/049,327-Conf. #3596   February 11, 2002   L. M						S	1617
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ransmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.    Claims   Remaining After   Number   Previously								
Total Claims Remaining After Amendment 0 - 20 = 0 x 25.00 0.00 independent 0 - 3 = 0 x 100.00 0.00 independent Claims (check if applicable)  TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 0.00 0.00 in the amount of \$ x Modificate copy of this sheet is enclosed.  Please charge Deposit Account No. in the amount of \$ x Adupticate copy of this sheet is enclosed.  A check in the amount of \$ to cover the filing fee is enclosed.  Payment by credit card. Form PTO-2038 is attached.  X The Director is hereby authorized to charge and credit Deposit Account No. o7-1180 as described below. A duplicate copy of this sheet is enclosed.  X The Director is hereby authorized to charge and credit Deposit Account No. o7-1180 as described below. A duplicate copy of this sheet is enclosed.  X Credit any overpayment.  X Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.  (Avery N. Goldstein, Ph.D./ Dated: October 24, 2006 Avery N. Goldstein, Ph.D./ Avery N. Golds	91 11							
Claims   Claims   Remaining   Highest   Number   Extra Claims   Rate   Number   Extra Claims   Rate   Number   Extra Claims   Rate   Previously   Rate   Number   Extra Claims   Rate   Number   Previously   Rate   Number   Number   Rate   Number						Discation.		
Remaining After Amendment   Previous   Pre			CLAIM	S AS AMENI	DED			
Independent Claims (check if applicable)  Other fee (please specify):  TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:  O.00  Large Entity  X No additional fee is required for this amendment.  Please charge Deposit Account No.  A duplicate copy of this sheet is enclosed.  A check in the amount of \$  Payment by credit card. Form PTO-2038 is attached.  X The Director is hereby authorized to charge and credit Deposit Account No.  x Or-1180  as described below. A duplicate copy of this sheet is enclosed.  Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.  (Avery N. Goldstein, Ph.D.)  Avery N. Goldstein, Ph.D.)  Avery N. Goldstein, Ph.D.  Altorney/Agent Reg. No.: 39,204  GIFFORD, KRASS, GROH. SPRINKLE, ANDERSON & CITKOWSKI, P.C.  2701 Troy Center Drive, Suite 330  Post Office Box 7021		Remaining After	Number Previously	Extra Claims		Rate		
Claims U - 3 = U X 100.00  Multiple Dependent Claims (check if applicable)  Other fee (please specify):  TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 0.00  Large Entity X Small Entity X No additional fee is required for this amendment.  Please charge Deposit Account No. in the amount of \$ A duplicate copy of this sheet is enclosed.  A check in the amount of \$ to cover the filing fee is enclosed.  Payment by credit card. Form PTO-2038 is attached.  X The Director is hereby authorized to charge and credit Deposit Account No. 07-1180 as described below. A duplicate copy of this sheet is enclosed.  X Credit any overpayment.  X Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.  //Avery N. Goldstein, Ph.D./ Dated: October 24, 2006  Avery N. Goldstein, Ph.D./ Dated: October 24, 2006  Avery N. Goldstein, Ph.D./ Avery N. Goldstein, Ph.D. Steps Step		0	- 20 =	0	x	25.00		0.00
Other fee (please specify):  TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:  No additional fee is required for this amendment.  Please charge Deposit Account No. A duplicate copy of this sheet is enclosed.  A check in the amount of \$		0	- 3 =	0	x	100.00		0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:    Large Entity   x   Small E	Multiple Depend	ent Claims (che	ck if applicabl	e) 🗌				
Large Entity  X No additional fee is required for this amendment.  Please charge Deposit Account No	Other fee (please	e specify):						
x No additional fee is required for this amendment.  Please charge Deposit Account No	TOTAL ADDITI	ONAL FEE FO	OR THIS AME	NDMENT:				0.00
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	GIFFORD, KRA 2701 Troy Cente Post Office Box Troy, Michigan	SS, GROH. SI er Drive, Suite 7021	PRINKLE, ANI	DERSON & C	ITKOV	VSKI, P.C.		